

## **Influenza Vaccination Strategy Checklist**

Only 74% of Massachusetts residents  $\geq 65$  years of age, and only 42% of residents 18 – 64 years of age with a chronic medical condition, receive annual flu vaccination. A systematic approach to vaccination can greatly increase immunization levels. Strategies shown to improve influenza vaccination coverage are outlined below.

### **STRATEGIES**

- ✓ Convene a planning committee to address patient and staff influenza vaccination. Develop an action plan with timelines and assignment of responsibilities.
- ✓ Develop a written policy for influenza vaccination of patients and staff.
- ✓ Use a computer tracking or record review to identify high risk patients, including:
  - Everyone  $\geq 50$  years of age and
  - Everyone  $< 50$  years of age with a chronic medical condition.
- ✓ Have signed standing orders in place.
- ✓ Develop a system for obtaining consent for vaccination in your institution.
- ✓ Develop an educational program on influenza for patients and staff.
- ✓ Conduct quality assurance chart reviews to ensure that flu vaccine is offered to all patients.
- ✓ For more information on strategies to increase adult immunization coverage, see the CDC web site at <http://www.cdc.gov/nip/publications/adultstrat.htm#>.

### **EMPLOYEE VACCINATION**

Immunize all employees and volunteers who have contact with patients in hospitals, outpatient clinics, residential facilities and home care agencies as soon as vaccine becomes available.

**Protect yourself, your family and your patients.  
All health care providers should be vaccinated with flu vaccine every year.**

### **PATIENT VACCINATION**

- ✓ From the time that vaccine becomes available through March, assess need for influenza vaccination and vaccinate if necessary at:
  - Every outpatient visit, including well-patient and emergency room visits;
  - Every discharge from acute-care facilities; and
  - Every home care visit.
- ✓ In long-term care facilities, vaccinate all residents in October; vaccinate new admissions from October through March.
- ✓ Hold organized vaccination campaigns in November and December.
- ✓ Vaccinate anyone with an unknown or unclear history of an influenza vaccination.
- ✓ Administer flu vaccine simultaneously with pneumococcal, Td and other needed vaccines.
- ✓ Provide every patient with a personal immunization record.